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07/15/2008

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WESTERMAN, HATTORI, DANIELS & ADRIAN, LLP 1250 CONNECTICUT AVENUE NW - SUITE 700 **WASHINGTON, D.C. 20036**

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(Depositor's name)

						****		(Signature)	
								(Date)	
APPLICATION NO.	ION NO. FILING DATE FIRST			NAMED INVENTOR A		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/632,863			umi TANIMOTO 030		0817 4619				
TITLE OF INVENTION	: ELECTRONIC MA	IL CLIENT AND	RECORDING MED	IUM RECO	RDING PROGI	RAM FOR CLIE	NT		
APPLN, TYPE SN	MALL ENTITY ISS	UE FEE PUBLI	CATION FEE DUE	PREV. PAI	D ISSUE FEE	TOTAL FEE(S)	DUE	DATE DUE	
nonprovisional NO \$1510			\$300		\$0 \$1810			10/15/2008	
EXAM		ART UNIT	CLASS-SUB						
Christopher D	. Biagini	2142	2142 709-20600						
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or :Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1 WESTERMAN, HATTORI, 2. DANIELS & ADRIAN, LLP. 3.						
3. ASSIGNEE NAME AND PLEASE NOTE: Unless as set forth in 37 CFR 3.1	D RESIDENCE DATA TO an assignee is identified b	elow, no assignee data	will appear on the pat	ent. If an assi	gnee is identified	below, the docume	nt has been	filed for recordation	
(A) NAME OF ASSIC	(B) RESIDENCE: (CITY and STATE OR COUNTRY)								
Murata Kikai Kabushiki Kaisha			Ky	oto, Japan					
Please check the appropriate	assignee category or cate	gories (will not be prin	nted on the patent):	Individual	□ Corporation c □	or other private grou	ip entity	☐Government	
4a. The following fee(s) are	enclosed:		4b. Payment of Fee	(s): (please fir	st reapply previou	sly paid issue fee s	hown above	2)	
Issue Fee☑ Publication Fee (No sm	☐ A check in the amount of the fee(s) is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.								
Advance Order - # of C	☐ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2866 (enclose an extra copy of this form).								
			I Denosit Accou	nt Number 50-	2866 (enclose an	extra copy of this fo	orm).		

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The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

William M. Schertler Typed or printed name ____

October 14, 2008 Date 35,348

□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is soverned by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: nissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Registration No.

5. Change in Entity Status (from status indicated above) ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.